

189259

STATE OF SOUTH CAROLINA

(Caption of Case)

Request For class C
Taxi License

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

COVER SHEET

DOCKET
NUMBER: 2007 - 391 - T

(Please type or print) Rodney T. Wright DBA
Submitted by: Tyrones' Taxi

SC Bar Number:

Telephone: (843) 893-2960

Fax: 893-2960

Other: 296-3195

Address: 1516 Hope Plantation Lane
P.O. Box 84

Jacksonboro S.C. 29452

Email: rtwright@lowcountry.com (lawcase)

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

DOCKETING INFORMATION (Check all that apply)

☐ Emergency Relief demanded in petition

☐ Request for item to be placed on Commission's Agenda expeditiously

☐ Other:

INDUSTRY (Check one)

- ☐ Electric
☐ Electric/Gas
☐ Electric/Telecommunications
☐ Electric/Water
☐ Electric/Water/Telecom.
☐ Electric/Water/Sewer
☐ Gas
☐ Railroad
☐ Sewer
☐ Telecommunications
☒ Transportation
☐ Water
☐ Water/Sewer
☐ Administrative Matter
☐ Other:

NATURE OF ACTION (Check all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> Affidavit | <input type="checkbox"/> Letter | <input type="checkbox"/> Request |
| <input type="checkbox"/> Agreement | <input type="checkbox"/> Memorandum | <input type="checkbox"/> Request for Certification |
| <input type="checkbox"/> Answer | <input type="checkbox"/> Motion | <input type="checkbox"/> Request for Investigation |
| <input type="checkbox"/> Appellate Review | <input type="checkbox"/> Objection | <input type="checkbox"/> Resale Agreement |
| <input checked="" type="checkbox"/> Application | <input type="checkbox"/> Petition | <input type="checkbox"/> Resale Amendment |
| <input type="checkbox"/> Brief | <input type="checkbox"/> Petition for Reconsideration | <input type="checkbox"/> Reservation Letter |
| <input type="checkbox"/> Certificate | <input type="checkbox"/> Petition for Rulemaking | <input type="checkbox"/> Response |
| <input type="checkbox"/> Comments | <input type="checkbox"/> Petition for Rule to Show Cause | <input type="checkbox"/> Response to Discovery |
| <input type="checkbox"/> Complaint | <input type="checkbox"/> Petition to Intervene | <input type="checkbox"/> Return to Petition |
| <input type="checkbox"/> Consent Order | <input type="checkbox"/> Petition to Intervene Out of Time | <input type="checkbox"/> Stipulation |
| <input type="checkbox"/> Discovery | <input type="checkbox"/> Prefiled Testimony | <input type="checkbox"/> Subpoena |
| <input type="checkbox"/> Exhibit | <input type="checkbox"/> Promotion | <input type="checkbox"/> Tariff |
| <input type="checkbox"/> Expedited Consideration | <input type="checkbox"/> Proposed Order | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Interconnection Agreement | <input type="checkbox"/> Protest | |
| <input type="checkbox"/> Interconnection Amendment | <input type="checkbox"/> Publisher's Affidavit | |
| <input type="checkbox"/> Late-Filed Exhibit | <input type="checkbox"/> Report | |

Print Form

Reset Form

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
ATTN: DOCKETING DEPARTMENT
101 EXECUTIVE CENTER DRIVE
COLUMBIA, SOUTH CAROLINA 29210
(Mailing address: Post Office Box 11649, Columbia, SC 29211)
Office # (803) 896-5100 - Fax # (803)-896-5199

CLASS C - TAXIDATE 10-17, 2007

**APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND
NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER**

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

Rodney T. Wright dba
Tyrone's Taxi

2. (a) Street Address of Applicant 1566 Hope Plantation Lane

Jacksonboro, S.C. 29452

- (b) Mailing address, if different from street address P.O. Box 84

Jacksonboro S.C. 29452

- (c) Telephone Number (843) 893-2960

5

3. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of S.C., need S.C. Secretary of State "Foreign Corporation" Certificate.)

4. (a) If a partnership, names and addresses of all persons having an interest in the business. (b) If a corporation, names and addresses of two principal officers will be sufficient.

Sole Proprietorship

5. The proposed service to be provided and the proposed rates and charges for such service, per Exhibit "C" included herewith. Taxi Service; Metropolitan Charleston Area, see attached schedule of fees

6. The proposed list of equipment is as per Exhibit "D" included herewith.

1999 Plymouth Grand Voyager

07/55

7. Applicant is financially able to furnish the services as specified in this Application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance at Time Application is Filed:

Month: 10 Year: 07

Assets:	
Cash	3700
Receivables	
Real Estate	
Buildings and Equipment-Net	
Motor Vehicles-Net	5685
Garage Equipment-Net	
Machinery and Tools-Net	900
Supplies on Hand	
Prepays and Other Assets	
Total Assets	10,285
Liabilities and Equity:	
Accounts Payable	0
Notes Payable	0
Mortgages Payable	0
Equipment Obligations	0
Accrued Salaries and Wages	0
Other Accrued Obligations	0
Other Liabilities	0
Total Liabilities	0
Capital Stock	0
Retained Earnings	0
Total Equity	
Total Liabilities and Equity	

8. Applicant is familiar with the provision of S.C. Code Ann., §58-23-10, et seq. (1976), and amendments thereto, and R.103 100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol. 23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOUTH CAROLINA,

COUNTY OF Colleton

I, Rodney T. Wright, Owner/Operator
(Name of Applicant's Representative) (Title)
of Tyrones' Taxi, the Applicant for the Certificate of Public (Applicant)
Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above
Application are true and correct.

SWORN TO BEFORE ME

At Jacksonburg, SC
This the 17th day of October 2007
[Signature]
(Notary Public)

[Signature]
(Signature of Applicant's Representative)

Commission Expires: 7-9-2007

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

Columbia, South Carolina

Applicant Tyrones' TAXI

For the transportation of passengers as follows:

Area to be served: Metropolitan CharlestonCharleston, Berkeley, DorchesterNumber of passengers: 7Fares: See Attached Fare ScheduleDate 10-17-07Rodney B. J. / J
ByOwner/operator
Title

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA

DESCRIPTION OF EQUIPMENT

[illegible]

* Seats if passenger carrier.

Tyrones' Taxi

(Applicant)

Date: 10-17-07

(Applicant)

Andy Szylt

(Applicant's Representative)

owner/operator
(Title)

Zoom: 100%
50%
80%
100%

Pages: 1



INSURANCE QUOTE

The following insurance quote is for:

Rodney T Wright DBA Tyrones' Taxi
(Name of Motor Carrier)
P.O. Box 84 Jacksonboro S.C. 29452
(Address of Motor Carrier)

Amount of Premium:

Liability Insurance \$4,196.00

The above quoted premium is for a term of 12 months.

Minimum Limits - Intrastate Only:

1 - 7 passengers : 75,000/75,000/75,000
8 - 15 passengers : 25,000/100,000/25,000

Columbia Insurance Company
(Insurance Company Name)
3024 Harney St. Omaha, Nebraska 68131
(Home Office Address of Company)

is familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

10-31-07 LM 4
Date (Authorized Insurance Company Representative)
(843) 577-0052

Tyrones' Taxi Rate sheet 12/07

All fares are quoted from the peninsular area. ~~Each additional person (including children) is \$1.00 on all fares.~~

West Ashley

Ardmore	8.00
Arlinton Drive	12.00
Ashley Crossing	12.00
Ashley Hall Road	9.00
Ashley Plaza Mall	9.00
Ashleyville	7.00
Bee's Ferry Road (Hwy61)	17.00
California Dreaming	6.00
Carriage Lane	7.00
Citadel Mall	11.00
Coburg	8.00
Cosco	12.00
Cypress Cove	15.00
Dogwood	15.00
Dupont	10.00
Drayton Hall Elementary	18.00
Drayton Hall Plantation	24.00
Eckerd's(Hwy 61/171)	7.00
Eckerd's (Hwy 61/ Savage)	11.00
Etiwan Avenue	12.00
Hfjtr-ton Inn Riverview	6.00
Hampton Inn (1-5261 Hwy 17)	12.00
Heron Reserve	15.00
Holiday Inn Riverview	6.00
In Town Suites	12.00
Kmart	8.00
lenevar	9.00
Magnolia Road	24.00
Manor Care	8.00
Maryville	10.00
Melrose	7.00
Motel 6	11.00
Orleans Woods	11.00
Orange Grove Road	11.00
Pierpoint	15.00
Piggly Wiggly (Quadrangle)	11.00
Orleans wood	10.00
Plantation Apt.	15.00
Playground Road	11.00
Ponderosa	7.00
Riverview	8.00
Orange grove rd	17.00
Royal Palms Blvd	6.00
St. Andrew's Center	10.00
St. Andrew's Garden	8.00
St. Francis Hospital	8.00
Savage Road (Hwy 17)	12.00
Savage Road (Hwy 61)	12.00
Shadowmoss	11.00
	18.00

Walmart	17.00
Wappoo Road	9.00
West Ashley High School	13.00
White Oak	8.00

LOCAL FARES OF CITY LIMITS OF WEST ASHLEY -\$6.00+

East Cooper

Boone Hall Plantation	15.00
Charleston Nursing	10.00
Dentyen Shipyard	27.00
Dune West	28.00
East Cooper Hospital	10.00
Franky Holmes	12.00
Hickory Shadows	11.00
H & R Sweet Shop	9.00
Isle of Palms	23.00
Laing Middle School	15.00
Me Donald's	10.00
Moultrie Middle School	9.00
Remley's Point	8.00
Rifle Range	11.00+
Sandpiper Nursing Home	10.00
Shem Creek	9.00
Shoney's	8.00
Snowden	14.00
Sullivan's Island	17.00
Towne Center	15.00
Yenning Road	11.00
Wando High School	20.00
Wando Terminal	14.00
Walmart	11.00
Wild Dunes	27.00
Hamilian Beach Dr	17.00
10 Mile Road HWY	20.00
17N&HWY41	20.00

LOCAL FARES OF CITY LIMITS OF EAST COOPER - \$5.00

Others

Peninsular City	5.00
Each Additional Person	1.00(All Fares)
Grocery Bags- 3 Free, .50 each others	
Other Distances	1.75 Per Mile

Package Delivery